

# EXHIBIT F

Case Name Administrator  
P.O. Box 404041  
Louisville, KY 40233-4041

ICR

**Must Be Postmarked  
No Later Than  
July 12, 2018**

## ILLINOIS STATE CRT ANTITRUST SETTLEMENT CLAIM FORM

### CLAIMANT INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name	M.I.	Last Name
<input type="text"/>		
Primary Address		
<input type="text"/>		
Primary Address Continued		
<input type="text"/>	<input type="text"/>	<input type="text"/>
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Foreign Province	Foreign Postal Code	Foreign Country Name/Abbreviation

Complete this Claim Form to receive payment from settlements totaling more than \$36 million. Illinois consumers (individuals and businesses) that purchased televisions or monitors containing CRTs from a retailer or someone other than the manufacturer of the component CRT are eligible to receive a payment from the settlement funds. A CRT is a piece of technology used as displays (screens) in televisions and computer monitors. Before LCD, Plasma and LED display technologies became popular, CRTs were the main technology used for displays in these devices.

You must answer the two Eligibility Questions and list the number of CRT televisions and/or monitors you purchased to submit a claim. **Each eligible product must contain a CRT.** The amount you could expect to receive per product is \$20 for each CRT television and \$60 for each CRT monitor.

**Your recovery could be a smaller amount than the maximum because there is a limited amount of money in the Settlement Fund. The amount paid per product and the number of claims allowed per consumer will depend on the number of claims submitted on or before the deadline, which is July 12, 2018.** Any claims filed after July 12, 2018 will be considered for payment only if settlement funds remain after all valid claims filed by that date have been paid in full.



FOR CLAIMS PROCESSING ONLY	OB <input type="text"/>	CB <input type="text"/>	<input type="radio"/> DOC <input type="radio"/> LC <input type="radio"/> REV	<input type="radio"/> RED <input type="radio"/> A <input type="radio"/> B
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## Section 1: Eligibility Questions

- ☐ Yes    ☐ No

- ☐ Yes   ☐ No

## Section 2: Purchase Information

If you answered “Yes” to both Eligibility Questions, you are eligible to file a claim by completing the form below.

Enter the total number of CRT televisions and/or CRT monitors you or your business purchased **between March 1, 1995 and November 25, 2007**, for your own use while residing in the state of Illinois. **Please enter the total number of products purchased, not the amount paid for the products.**

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*Proof of purchase is not required to submit a claim but may be required later to verify eligibility..*

### Section 3: Personal Information

First Name										M.I.	Last Name																		

[illegible][illegible]

Specify one of the following: ☐ Individual ☐ Business

[illegible]

City	State	Zip Code

[illegible]

—    —      
 Area code Telephone number (daytime)

X	X	X	—	X	X	—			
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**Section 4: Acknowledgment and Verification**

I (We) understand that this Claim Form and all communications with the Illinois State Attorney General's Office may become public records under state law and that public records are subject to disclosure (except private personal information) in response to requests. **Personal information of individuals (address, phone number, email address and Social Security number) is confidential and will not be publicly disclosed.**

I (We) declare that the above information, including quantity of CRT products purchased is correct, and:

**For individuals** - I (we) purchased these CRT products for my (our) own use and not for resale and that at the time of the purchase(s) of all CRT televisions and/or CRT monitors claimed in this form, I (we) resided in Illinois;

**For businesses**- (i) I am duly authorized by this business to make this verification; (ii) this business purchased its CRT products for its own use and not for resale, and, (iii) at the time of the purchase(s) of all CRT televisions and/or CRT monitors claimed in this form, check one or both of the options below, as applicable:

\_\_\_ its headquarters was located in Illinois; or

\_\_\_ it was incorporated in Illinois.

*For individuals, the name of the person signing this acknowledgement and verification must match the name listed in Section 3 (Personal Information). For businesses, the individual verifying the information must be a duly authorized officer of the business. Verification provided by anyone else will be treated as an unverified claim and invalidated.*

**I (We) declare, under the penalty of perjury under the laws of the State of Illinois, that the information provided in this Claim Form is true and correct.**

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Signature

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Dated

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Print Name

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Title (if you are filing out this form for a business)



Reminder

1. Complete all four parts of this Claim Form.
2. Sign the Claim Form.
3. Submit your Claim Form online or by mail postmarked no later than July 12, 2018, to:  
[www.illinoisrtsettlement.com](http://www.illinoisrtsettlement.com) or CRT ILLINOIS CLAIMS  
P.O. Box 404041  
Louisville, KY 40233-4041
4. Keep a copy of the completed Claim Form for your records.
5. Retain your proof-of-purchase documentation until your claim is closed. You will be notified if you are required to provide this documentation during the claim-verification process.

